



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov

**\*BIBDATASHEET\***

Bib Data Sheet

CONFIRMATION NO. 7072

SERIAL NUMBER 09/937,840	FILING DATE 01/28/2002  RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. ABI1550-1						
<p>APPLICANTS</p> <p>Patrick Soon-Shiong, Malibu, CA;</p> <p>Neil P. Desai, Los Angeles, CA;</p> <p><i>cm</i></p> <p><b>** CONTINUING DATA *****</b></p> <p>This application is a 371 of PCT/US00/10849 04/21/2000 and claims benefit of 60/130,863 04/22/1999</p> <p><b>** FOREIGN APPLICATIONS *****</b></p> <p><i>not cm</i></p>										
<p>Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no</p> <p>35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance</p> <p>Verified and Acknowledged</p>		<p>STATE OR COUNTRY CA</p>	<p>SHEETS DRAWING</p>	<p>TOTAL CLAIMS 17</p>	<p>INDEPENDENT CLAIMS 5</p>					
<p>ADDRESS</p> <p>30542 FOLEY &amp; LARDNER P.O. BOX 80278 SAN DIEGO, CA 92138-0278</p>										
<p>TITLE</p> <p>Long term administration of pharmacologically active agents</p>										
<p>FILING FEE  RECEIVED 980</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p> <table border="1"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees ( Filing )</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees ( Issue )</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> Credit</td> </tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> All Fees										
<input type="checkbox"/> 1.16 Fees ( Filing )										
<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )										
<input type="checkbox"/> 1.18 Fees ( Issue )										
<input type="checkbox"/> Other _____										
<input type="checkbox"/> Credit										